



Missouri Ethics Commission  
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C121474

1. DATE OF REPORT  2/21/2013	OFFICE USE ONLY
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INSTRUCTIONS ON REVERSE SIDE

2. FULL NAME OF COMMITTEE SKALA FOR COUNCIL	
3. COMMITTEE MAILING ADDRESS 5201 GASCONADE DRIVE CITY / STATE / ZIP COLUMBIA MO 65202	4. COMMITTEE TELEPHONE NUMBER  (573) 474-2194
5. TREASURER'S NAME BETTY WILSON	
6. TREASURER'S MAILING ADDRESS 1719 UNIVERSITY AVE CITY / STATE / ZIP COLUMBIA MO 65201	7. TREASURER'S TELEPHONE NUMBER HOME: (573) 442-1372 WORK:
8. DEPUTY TREASURER'S NAME <input type="checkbox"/> CHECK IF NO DEPUTY TREASURER VICKI HOBBS	
9. DEPUTY TREASURER'S MAILING ADDRESS 4001 SOUTH COATS LANE COLUMBIA MO 65203 CITY / STATE / ZIP	10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: (573) 445-4940 WORK: (573) 445-4940
11. DATE OF ELECTION 4/2/2013	12. TYPE OF ELECTION ( CHECK ONE ) <input type="radio"/> PRIMARY <input checked="" type="radio"/> GENERAL <input type="radio"/> SPECIAL
13. TIME PERIOD COVERED BY THIS STATEMENT FROM 11/27/2012 THROUGH 2/16/2013	
14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY  KARL SKALA 5201 GASCONADE DRIVE  COLUMBIA MO 65202  (573) 474-2195  COUNCIL PERSON  CITY OF COLUMBIA  <input type="checkbox"/> CHECK IF INCUMBENT  <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input checked="" type="checkbox"/> NON-PARTISAN	15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input checked="" type="checkbox"/> OTHER 40 Day Before General Municipal Election-4/ <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____
16. COMMITTEE TREASURER'S SIGNATURE  I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  ELECTRONICALLY FILED Feb 21 2013 6:05PM _____ TREASURER'S SIGNATURE	17. CANDIDATE'S SIGNATURE ( CANDIDATE COMMITTEES ONLY )  I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.  ELECTRONICALLY FILED Feb 21 2013 6:05PM _____ CANDIDATE'S SIGNATURE



# Missouri Ethics Commission

## REPORT SUMMARY

Instructions on Reverse Side

Name of Committee	Date of Report	Office Use Only
SKALA FOR COUNCIL	2/21/2013	

Receipts	A. This Period	B. This Calendar Yr or Election Cycle	Statement of Beginning and Ending Financial Condition	
1. Total Receipts For This Election Previously Reported		\$ 0.00		
2. All Monetary Contributions Received This Period	\$ 9,345.00			
3. All Loans Received This Period	+ 0.00			
4. Miscellaneous Receipts This Period	+ 0.00			
5. <b>Subtotal</b> Monetary Receipts This Period (Sum 2A + 3A + 4A)	\$ 9,345.00			
6. In-kind Contributions Received This Period	+ 126.67			
7. <b>Total</b> All Receipts This Period (Sum 5A + 6A)	\$ 9,471.67			
8. <b>Total All Receipts This Election</b> (Sum 1B + 7A)		\$ 9,471.67		
<b>Expenditures</b>	A. This Period	B. This Calendar Yr or Election Cycle		
9. Total Expenditures for this election previously reported		\$ 0.00		
10. Expenditures made by cash or check this period	\$ 748.57			
11. In-Kind Expenditures made this period	+ 0.00			
12. Expenditures incurred this period (not including loans) including payments made by credit card (line 17 CD3)	+ 500.00			
13. <b>Total</b> All expenditures made this period (Sum 10A + 11A + 12A) Including payments made by Credit Card (line 17 CD3)	\$ 1,248.57			
14. <b>Total Expenditures This Election</b> (Sum 9B + 13A)		\$ 1,248.57		
<b>Contributions Made</b>	A. This Period	B. This Calendar Yr or Election Cycle		
15. Total Contributions Made For This Election Previously Reported		\$ 0.00		
16. All Contributions Made This Period (25A or 25B of CD3)	A 0.00	← Cash/Check		
	B 0.00	← Credit Card		
17. All In-Kind Contributions Made This Period	+ 0.00			
18. <b>Total</b> Contributions Made This Period (Sum 16A + 17A)	\$ 0.00			
19. <b>Total All Contributions Made This Election</b> (Sum 15B + 18A)		\$ 0.00		
<b>Other Disbursements</b>	A. This Period	B. This Calendar Yr or Election Cycle		
20. Funds Used For Paying Loans This Period Including Credit Card Payments	+ 0.00			
21. Payments This Period on Prev Reported Expend Incurred (Paid by Cash/Check Only)	+ 0.00			
22. Any Miscellaneous Disbursement Not Reported Elsewhere	+ 0.00			
23. <b>Total Other Disbursements This Period</b> (Sum 20A + 21A + 22A)	\$ 0.00			
			<b>Money On Hand</b>	
			24. Money On Hand at the beginning of this reporting period (Including funds in depository, cash, savings accounts and all other investments)	\$ 0.00
			25. Monetary Receipts this Period (From Item 5 - this page)	+ 9,345.00
			26. Monetary Disbursements Made This Period (Sum 10 + 16A + 23) a) Disbursements By Check \$ 748.57 b) Disbursements By Cash \$ 0.00	- 748.57
			27. Money On Hand at the close of this reporting period (SUM 24 + 25 - 26)	\$ 8,596.43
			<b>Indebtedness</b>	
			28. Outstanding Indebtedness at the beginning of this period	\$ 0.00
			29. Loans Received This Period	+ 0.00
			30. A. New Expenditures Incurred This Period (include payments by Credit Card (Line 17 CD3)	+ 500.00
			B. New Contributions Made by Credit Card (Line 25B CD3)	+ 0.00
			31. Payments Made on Loans This Period	- 0.00
			32. Debt Forgiven on Loans This Period	- 0.00
			33. Payments Made This Period on Expenditures Incurred in Previous Period (Paid by Cash/Check Only) (Line 21 this page)	- 0.00
			34. Total Indebtedness at the Close of This Reporting Period (Sum 28 + 29 + 30A + 30B - 31 - 32 - 33)	\$ 500.00



**MISSOURI ETHICS COMMISSION**  
**CONTRIBUTIONS AND LOANS RECEIVED**  
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE SKALA FOR COUNCIL		2. REPORT DATE 2/21/2013	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: ADDRESS: CITY / STATE: View Supplemental Form(s) EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:		\$ ----- \$	\$  <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ 0.00	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ 9,461.67	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ 9,461.67	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>MONETARY</b> CONTRIBUTIONS		\$ 9,335.00	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS <b>IN-KIND</b> CONTRIBUTIONS		\$ 126.67	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$ 0.00	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ 10.00	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ 0.00	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$ 0.00	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$ 0.00	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$ 0.00	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$ 0.00	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$ 126.67	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ 9,345.00	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ 9,335.00	



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Karl Skala CITY / STATE: 5201 Gasconade EMPLOYER: Columbia MO 65201 Retired <input type="checkbox"/> COMMITTEE:	11/27/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hilda Adams CITY / STATE: 4579 Laclede Ave EMPLOYER: Columbia MO 63108 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Betty Wilson CITY / STATE: 1719 University Ave EMPLOYER: Columbia MO 65201 Oliver Walker Wilson -- Attorney <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Tyler CITY / STATE: 805 Edgewood Ave EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Herbert & Susan Tillema CITY / STATE: 306 Westridge Dr EMPLOYER: Columbia MO 65203 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bertrice Bartlett CITY / STATE: 1627 Wilson Ave EMPLOYER: Columbia MO 65201 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mary Hussmann CITY / STATE: 5306 Rice Rd EMPLOYER: Columbia MO 65202 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Wallace & Robin Remington CITY / STATE: 503 Taylor St EMPLOYER: Columbia MO 65201 Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Kay Callison CITY / STATE: 600 Crestland Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Carolyn Matthews CITY / STATE: 4200 Rock Quarry Rd Columbia MO 65203 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 1.00	\$ 1.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Andrew Twaddle CITY / STATE: 919 Edgewood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Sapp CITY / STATE: 1025 Hickory Hill Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ed & Anita Metzen CITY / STATE: 2256 Country Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Liz Schmidt CITY / STATE: 1700 Forum Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diane Booth CITY / STATE: 3609 Holly Hills Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Harry Feirman CITY / STATE: 7301 N Boothe Ln Rocheport MO 65279 EMPLOYER: Self-employed -- Consultant <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Mariel Stephenson CITY / STATE: 2111 Rock Quarry Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Miller CITY / STATE: 102-6 E Green Meadows Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Deanna Walkenbach CITY / STATE: 407 Pyrenees Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bruce Gordon CITY / STATE: 7 E Lathrop Columbia MO 65203 EMPLOYER: Columbia Anesthesia -- Anesthesiologist <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bruce Alspaugh CITY / STATE: 2815 Skyview Rd Columbia MO 65202 EMPLOYER: Ideal Source -- Software Dev <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Kurt & Patrice Albert CITY / STATE: 400 E High Point Ln Columbia MO 65203 EMPLOYER: Self-employed -- Carpenter <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dan Goldstein CITY / STATE: 604 Redbud Ln Columbia MO 65203 EMPLOYER: North West Research Assoc -- Research Scientist <input type="checkbox"/> COMMITTEE:	12/4/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Roy Dudark CITY / STATE: 3709 Falmouth Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/6/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Marion Mace CITY / STATE: 3651 S Ben Williams Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/6/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David K Robinson CITY / STATE: 209 Elliott Dr Columbia MO 65201 EMPLOYER: Truman State Univ -- Professor <input type="checkbox"/> COMMITTEE:	12/6/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Lawrence Lile and Qhyrrae Michaelieu CITY / STATE: 7425 E Rte Y Ashland MO 65010 EMPLOYER: Lile Engineering -- Engineer <input type="checkbox"/> COMMITTEE:	12/6/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: H Denny & Martha Donnell CITY / STATE: 1105 Pheasant Run Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Llona Weiss CITY / STATE: 1801 Johnmeyer Ln Columbia MO 65203 EMPLOYER: State of MO <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael Ugarte CITY / STATE: 1505 Windsor St Columbia MO 65201 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dennis & Ruth Wright CITY / STATE: 504 Cumberland Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Emma Jean McKinin CITY / STATE: 703 Ingleside Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)





MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

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A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Kathleen Weinschenk CITY / STATE: 1504 Sylvan Ln Columbia MO 65202 EMPLOYER: Not employed <input type="checkbox"/> COMMITTEE:	12/7/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack B Clark CITY / STATE: 208 E Briarwood Ln Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/8/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paula McFarling & Peter Yronwode CITY / STATE: 203 Orchard Ct Columbia MO 65203 EMPLOYER: Univ of MO -- Coordinator <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Wayne & Rachel Brekhush CITY / STATE: 703 Hilltop Cr Columbia MO 65201 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	12/11/2012 ----- \$ 300.00	\$ 300.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joan Eisenstark CITY / STATE: 8 N Keene St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/13/2012 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Sturtz CITY / STATE: 109 Anderson Ave Columbia MO 65203 EMPLOYER: TrueFalse Film Festival -- Co-Director <input type="checkbox"/> COMMITTEE:	12/13/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Richard Baumann CITY / STATE: 1402 Anthony St Columbia MO 65201 EMPLOYER: Columbia College -- Educator <input type="checkbox"/> COMMITTEE:	12/14/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ken Green CITY / STATE: 206 Anderson Ave Columbia MO 65203 EMPLOYER: William Woods College -- Educator <input type="checkbox"/> COMMITTEE:	12/14/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)





MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
--	-------------------

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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Dan Viets CITY/STATE: 15 N 10th St Columbia MO 65201 EMPLOYER: Self-employed -- Attorney <input type="checkbox"/> COMMITTEE:	12/14/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David Jones CITY/STATE: 6200 E Spiva Crossing Hallsville MO 65255 EMPLOYER: Beltone Hearing -- Owner <input type="checkbox"/> COMMITTEE:	12/15/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ann Peters CITY/STATE: 3808 Berrywood Dr Columbia MO 65203 EMPLOYER: Self-employed -- Science Pipets <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Linda & Brent Lowenberg CITY/STATE: 210 Russell Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 30.00	\$ 30.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jim & Fran Muench CITY/STATE: 2711 Mallard Ct Columbia MO 65201 EMPLOYER: Self-employed -- Communications <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Haim CITY/STATE: 1402 Richardson St Columbia MO 65201 EMPLOYER: Mid-MO PeaceWorks -- Director <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Marjorie Pinkerton CITY/STATE: 20 Springer Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bonner Mitchell CITY/STATE: 14 Miller Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

---

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Vicky Riback Wilson CITY / STATE: 3201 Blackberry Ln Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Guthrie CITY / STATE: 400 Cedar Ln Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ben Londeree CITY / STATE: 2601 Chapel Wood Ter Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Victor Myers CITY / STATE: 4508 Mexico Gravel Rd Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Dorinda Derow CITY / STATE: 3421 E St Charles Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Susan Bliss CITY / STATE: 1855 Cliff Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/21/2012 ----- \$ 20.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Tom Dillingham CITY / STATE: 1501 University Ave Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/31/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Thomas & Andrea Allen CITY / STATE: 1800 Parklawn Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	12/31/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



# MISSOURI ETHICS COMMISSION

## CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: ADDRESS: Chris & Kelly Hayday CITY / STATE: 106 Rockingham Dr Columbia MO 65203 EMPLOYER: Self-employed -- Physician <input type="checkbox"/> COMMITTEE:	12/31/2012 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Stuart Palonsky CITY / STATE: 2212 Hominy Branch Ct Columbia MO 65201 EMPLOYER: Univ of MO -- Professor <input type="checkbox"/> COMMITTEE:	12/31/2012 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jai Amrod CITY / STATE: 513 Old Hwy 63 N Columbia MO 65201 EMPLOYER: Psychologist <input type="checkbox"/> COMMITTEE:	12/31/2012 ----- \$ 94.00	\$ 94.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jeff Barrow CITY / STATE: 1007 Coats St Columbia MO 65201 EMPLOYER: MO River Relief -- Director <input type="checkbox"/> COMMITTEE:	1/5/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Theodore Koditschek CITY / STATE: 2508 Shepard Blvd Columbia MO 65201 EMPLOYER: Univ of MO -- History Prof <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Fred Schmidt & Cathy Rosenholtz CITY / STATE: 110 Anderson Ave Columbia MO 65203 EMPLOYER: Self-employed -- Accountant <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Karl Kruse CITY / STATE: 2405 Lynnwood Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Hank Ottinger CITY / STATE: 511 Westwood Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

---

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: June Pfefer CITY / STATE: 2409 Bluff Blvd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/8/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Greg Wren CITY / STATE: 2000 E Broadway Columbia MO 65201 EMPLOYER: Computer Programmer <input type="checkbox"/> COMMITTEE:	1/10/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jane Cooper CITY / STATE: 500 Longfellow Ln Columbia MO 65203 EMPLOYER: Univ of MO -- Nurse Practitioner <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Margaret Miller CITY / STATE: 102-6 E Green Meadows Rd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 100.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Sidley & Joan Sullivan CITY / STATE: 2980 Maple Bluff Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/13/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Mark Buchheit CITY / STATE: 2309 W Broadway Columbia MO 65203 EMPLOYER: MO House of Rep -- Legislative Asst <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Robert & Coke Blake CITY / STATE: 2322 Meadowlark Ln Columbia MO 65201 EMPLOYER: Univ of MO -- Prof Emeritus <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Diane Booth & Jeanne Sebaugh CITY / STATE: 3609 Holly Hills Ct Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/18/2013 ----- \$ 200.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

---

(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: David Leuthold CITY / STATE: 2000 Valley View Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 150.00	\$ 150.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Allen Tacker CITY / STATE: 1708 Princeton Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: David & Anne Mehr CITY / STATE: 714 Ingleside Dr Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 250.00	\$ 250.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jack & Aline Kultgen CITY / STATE: 1012 Hickory Hill Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: M K Heitkamp CITY / STATE: 600 Paris Ct Columbia MO 65201 EMPLOYER: Univ of MO -- 4-H Dir of Development <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Vicki Curby CITY / STATE: 1201 S Rustic Rd Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/16/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Cindy Neagle CITY / STATE: PO Box 10201 Columbia MO 65205 EMPLOYER: Missouri Bar -- Attorney <input type="checkbox"/> COMMITTEE:	1/19/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Win Colwill CITY / STATE: 1417 N Countryshire Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/21/2013 ----- \$ 125.00	\$ 125.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Richard & Susan Burns CITY / STATE: 117 W Burnam Rd Columbia MO 65203 EMPLOYER: Truman VA Hospital -- Physician <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Michael & Sarah Seat CITY / STATE: 1206 Sunset Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Alyce Turner CITY / STATE: 1204 Fieldcrest Columbia MO 65203 EMPLOYER: State of MO <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Kessell CITY / STATE: 715 Lyons St Columbia MO 65201 EMPLOYER: Delmar Cobble -- Teacher <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Catherine Parke CITY / STATE: 413 Thilly Ave Columbia MO 65203 EMPLOYER: Moberly Area Community College -- Teacher <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Jean Sax CITY / STATE: 1904 W Fenton Rd Columbia MO 65202 EMPLOYER: Univ of MO -- Nurse <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Patrice Albert CITY / STATE: 400 E High Point Ln Columbia MO 65203 EMPLOYER: Univ of MO -- Research Spec <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 520.00	\$ 20.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Bill & Eleanore Wickersham CITY / STATE: 3632 Augusta Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

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NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Jane Ellen Ashley CITY / STATE: 404 Westridge Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Steve Skolnick CITY / STATE: 804 Wingham Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Liz Schmidt CITY / STATE: 1700 Forum Blvd Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 125.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Brian Treece & Mary Phillips CITY / STATE: 101 W Brandon Rd Columbia MO 65203 EMPLOYER: Self-employed -- Communications <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 200.00	\$ 200.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Paul Wallace & Robin Remington CITY / STATE: 503 Taylor St Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 150.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Trey Bistro CITY / STATE: 21 N 9th St Columbia MO 65201 EMPLOYER: <input type="checkbox"/> COMMITTEE:	1/22/2013 ----- \$ 126.67	\$ 126.67 <input type="checkbox"/> MONETARY <input checked="" type="checkbox"/> IN-KIND
NAME: ADDRESS: Eric Fuller CITY / STATE: 1927 S El Centro Columbia MO 65201 EMPLOYER: Danuser Tools -- Production Mgr <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ellen Wolfe CITY / STATE: 8000 Turner Farm Rd Columbia MO 65201 EMPLOYER: Univ of MO -- Medical Technologist <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)





MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Jon Poses CITY / STATE: 224 E Parkway Dr Columbia MO 65203 EMPLOYER: We Always Swing Inc -- Arts Admin <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Ian & Ellen Thomas CITY / STATE: 2616 Hillshire Dr Columbia MO 65203 EMPLOYER: Transportation Consultant <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Donna Hamilton CITY / STATE: 1614 Wilson Ave Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 15.00	\$ 15.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Russ & Susan Breyfogle CITY / STATE: 608 Woodridge Dr Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 35.00	\$ 35.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Al & Joan Hahn CITY / STATE: 3711 Woodridge Ct Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 50.00	\$ 50.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Pam Springsteel CITY / STATE: 5901 Red Wing Dr Columbia MO 65202 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/25/2013 ----- \$ 10.00	\$ 10.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Don & Marie Scruggs CITY / STATE: 1913 Vassar Dr Columbia MO 65203 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	1/30/2013 ----- \$ 25.00	\$ 25.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Elizabeth Peters CITY / STATE: 305 McNab Dr Columbia MO 65201 EMPLOYER: Univ of MO -- Physician <input type="checkbox"/> COMMITTEE:	1/30/2013 ----- \$ 500.00	\$ 500.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



MISSOURI ETHICS COMMISSION  
CONTRIBUTIONS RECEIVED - SUPPLEMENTAL

OFFICE USE ONLY

NAME OF COMMITTEE SKALA FOR COUNCIL	DATE 2/21/2013
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**INSTRUCTIONS**

**PURPOSE:** The purpose of the Contributions Received supplement is to provide a printed outline for attaching additional pages to Form CD1 (Contributions Received). This form should be used as additional space for reporting persons contributing more than \$100 and for committee contributions. This form may be reproduced as needed.

Total all itemized contributions at the bottom of the page and carry to item 7 (Subtotal: Itemized Contributions From Any Attached Pages) on Form CD-1.

If further information is needed concerning reporting itemized expenditures, see Form CD-1 Instructions.

A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.	4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
<b>3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)</b> NAME: ADDRESS: Dan Murphy CITY / STATE: 707 Mount Vernon Columbia MO 65201 EMPLOYER: Columbia Public Schools -- Teacher <input type="checkbox"/> COMMITTEE:	1/30/2013 ----- \$ 75.00	\$ 75.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Janet Thompson CITY / STATE: 8300 N Wagon Trail Rd Columbia MO 65202 EMPLOYER: Boone Co -- Commissioner <input type="checkbox"/> COMMITTEE:	2/5/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Evan Prost CITY / STATE: 1404 Gary St Columbia MO 65203 EMPLOYER: Univ of MO -- Instructor <input type="checkbox"/> COMMITTEE:	2/5/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: Joe & Meredith Donaldson CITY / STATE: 1001 Pheasant Run Columbia MO 65201 EMPLOYER: Retired <input type="checkbox"/> COMMITTEE:	2/12/2013 ----- \$ 100.00	\$ 100.00 <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE:	----- \$	\$ <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND

**TOTAL: ITEMIZED CONTRIBUTIONS**

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(CARRY TO ITEM 7 "SUBTOTAL: ITEMIZED CONTRIBUTIONS FROM ANY ATTACHED PAGES" ON FORM CD-1)



**MISSOURI ETHICS COMMISSION**  
**EXPENDITURES AND CONTRIBUTIONS MADE**  
 Instructions on Reverse Side

Office Use Only

1. Name of Committee SKALA FOR COUNCIL		2. Report Date 2/21/2013	
<b>A. Expenditures of \$100 or Less by Category</b> (List Payments to Campaign Workers in Section B Below)			4. Amount Paid or Incurred This Period
3. Category of Expenditure  View Supplemental Form(s)			
5. Subtotal: Non-Itemized Expenditures This Page (Sum Column 4)			\$ 0.00
6. Subtotal: Non-Itemized Expenditures Any Attached Pages			+ 174.09
7. Total: Non-Itemized Expenditures This Period (Sum 5 + 6)			\$ 174.09
<b>B. Itemized Expenditures All Over \$100</b> <b>And All Payments To Campaign Workers</b>			
8. Name and Address of Recipient	9. Date	10. Purpose - (If Payment was to a Campaign Worker, Show Aggregate Paid)	11. Amount This Period
Name: Hotcards Address: 1600 E 23rd St City / State: Cleveland OH 44114	1/17/2013	Printing  0.00	\$ <input checked="" type="checkbox"/> Paid 244.08 <input type="checkbox"/> Incurred
Name: Midwest Mailing Address: PO Box 723 City / State: Columbia MO 65205	1/24/2013	Mailing service  0.00	\$ <input checked="" type="checkbox"/> Paid 330.40 <input type="checkbox"/> Incurred
Name: Progressive Political Partners Address: 4001 S Coats Ln City / State: Columbia MO 65203	2/16/2013	Strategic Planning & Mgmt  0.00	\$ <input type="checkbox"/> Paid 500.00 <input checked="" type="checkbox"/> Incurred
12. Subtotal: This Page ( Sum Column 11)			\$ 1,074.48
13. Subtotal: Any Attached Pages			+ 0.00
14. Total: Itemized Expenditures This Period (Sum 12 + 13)			\$ 1,074.48
15. Total: Monetary Expenditures This Period (Sum 7 + 14)			\$ 1,248.57
16. Amount of Line 15 Above which was Paid Out This Period			\$ 748.57
17. Amount of Line 15 Which Were Expenditures Incurred This Period Including Payments Made by Credit Cards			\$ 500.00
18. If Committee Made Any In-Kind Expenditures This Period, List Amount			\$ 0.00
19. Funds Used For Paying Loans/Credit Cards This Period (Attach Form CD1B - amount goes to Line 5 / Part II)			\$ 0.00
<b>C. Contributions Made (Regardless of Amount)</b>		21. Date	22. Amount
20. Name and Address of Candidate or Committee			\$
Name:			<input type="checkbox"/> Monetary
Address:			<input type="checkbox"/> In-Kind
City / State:			
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
Name:			\$
Address:			<input type="checkbox"/> Monetary
City / State:			<input type="checkbox"/> In-Kind
23. Subtotal: This Page (Sum Column 22)			\$ 0.00
24. Subtotal: Any Attached Pages			\$ 0.00
25. Total: Monetary Contributions Made This Period		A. By Cash / Check	\$ 0.00
		B. By Credit Card	\$ 0.00
26. If Committee Made Any Loans This Period, List Amount			\$
27. Total: All Monetary Contributions and Loans Made This Period (Sum 25 + 26)			\$ 0.00
28. Total: In-Kind Contributions Made This Period, List Amount			\$ 0.00



NAME OF COMMITTEE SKALA FOR COUNCIL		DATE 2/21/2013
<b>EXPENDITURES OF \$100 OR LESS BY CATEGORY</b> <b>(LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B ON FORM CD3 OR USE FORM CD3 SUP B)</b>		AMOUNT PAID OR INCURRED THIS PERIOD
CATEGORY OF EXPENDITURE		
Stamps		\$ 45.00
Bank Service Charge		\$ 4.00
Office Supplies		\$ 33.70
Copies		\$ 76.11
Online fundraising fees		\$ 15.28
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
TOTAL: ITEMIZED EXPENDITURES THIS PAGE		
(CARRY TO ITEM 13. "SUBTOTAL: ANY ATTACHED PAGES" ON FORM CD-3)		\$ --